

**FLORIDA DEPARTMENT OF STATE    DIVISION OF ELECTIONS**  
**CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Elfman, Howard  
**Name**

(2) 1631 E. Broward Blvd.  
**Address (number and street)**

Fort Lauderdale, FL 33301  
**City, State, Zip Code**

☐ **CHECK IF ADDRESS HAS CHANGED**

(3) **ID Number:** \_\_\_\_\_

**OFFICE USE ONLY**

CITY CLERK  
2008 OCT -3 AM 10:11

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** City Commission District 2 City of Fort Lauderdale

☐ **Political Committee**

☐ **CHECK IF PC HAS DISBANDED**

☐ **Committee of Continuous Existence**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF NO OTHER ELECTIONEERING  
COMMUNICATION REPORTS WILL BE FILED**

**(5) REPORT IDENTIFIERS**

Cover Period: From 07 / 01 / 2008 To 09 / 30 / 2008 Report Type Q3

☒ **Original**    ☐ **Amendment**    ☐ **Special Election Report**    ☐ **Independent Expenditure Report**

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks       \$ \_\_\_\_\_

Loans                       \$ 500.00

Total Monetary       \$ \_\_\_\_\_

In-Kind                       \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary  
Expenditures       \$ 0.00

Transfers to Office  
Account               \$ 0.00

Total  
Monetary               \$ 0.00

(8) **Other Distributions**  
       \$ 0.00

(9) **TOTAL Monetary Contributions To Date**  
       \$ 500.00

(10) **TOTAL Monetary Expenditures To Date**  
       \$ 0.00

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

I certify that I have examined this report and it is true, correct, and complete.

(Type name)               Howard Elfman

☐ Individual (only for electioneering commun.)    ☒ **Treasurer**    ☐ **Deputy Treasurer**

**X**

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)               Howard Elfman

☒ **Candidate**    ☐ **Chairperson (only for PC, PTY & electioneering commun. organization)**

**X**

Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Howard Elfman

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 01 / 2008 through 09 / 30 / 2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
09 / 30 / 2008	Elfman, Howard 1631 E. Broward Blvd Fort Lauderdale, FL 33301	I		LOA			500.00
001							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							